

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | PS       | 6662.1 | 8/25    |
| O.I.P.E. CLASSIFIER       |          | 45     | 8/30/00 |
| FORMALITY REVIEW          |          |        |         |
| RESPONSE FORMALITY REVIEW |          | 49605  | 10-2-00 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 10/19/02 |
| 2        | 11/18/03 |
| 3        | 11/18/03 |
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| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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